PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

1080027

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			G.]	RATE	FEE	7	RATE	FEE
FOR			/ NUMBER FILED		NUME	ER EXTRA		BASIC FEE	 	1	BASIC FEE	
-		ADI E CLAIME	7		. 0				005.00	OR		
TOTAL CHARGEABLE CLAIMS			9 minus 20=					X\$ 9=	ļ	OR	X\$18=	
_	DEPENDENT C	·	minus 3 =		0			X43=		OR	X86=	
MU	JLTIPLE DEPEI	NDENT CLAIM P	RESENT	<u></u>				+145=		OR	+290=	
* If	the difference	e in column 1 is	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	200	
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)	,	(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	-	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						l	1.45			+290=	
								+145= TOTAL	·	OR	TOTAL	
								DDIT. FEE		OR	ADDIT. FEE	
		(Column 1)	1	(Colum		(Column 3)	1 -	•		1 1		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9≈		OR	X\$18=	
	Ind pendent	*	Minus	***		= .		X43=		00	X86=	
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
							L	+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)							•				- [
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	,	HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	T tal	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	017	X43=		. 1	X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	7,10-		OR	7,00=	
	+ Maha andra in action of interesting the same of the									OR	+290=	
**	* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							TOTAL ODIT. FEE		OR ,	TOTAL DDIT. FEE	
		mber Previously Paid b r Previously Paid							ropriate box			